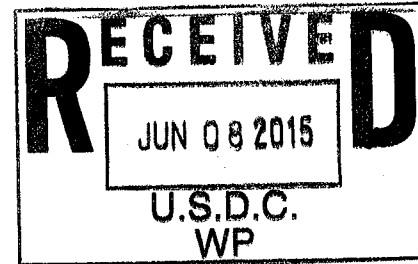


**ORIGINAL**UNITED STATES DISTRICT COURT  
SOUTHERN DISTRICT OF NEW YORK

JAMES JIGGETTS

(In the space above enter the full name(s) of the plaintiff(s).)

**COMPLAINT****-against-**

MOHANIE SUKHU-INSTIGATOR

MORTIMER ZUCKERMAN-PUBLISHER

COLIN MYLER-EDITOR

JOHN MARZULLO-AUTHOR

NEW YORK DAILY NEWSPAPER

Jury Trial:  Yes  No  
(check one)**15CV 4565**

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(In the space above enter the full name(s) of the defendant(s). If you cannot fit the names of all of the defendants in the space provided, please write "see attached" in the space above and attach an additional sheet of paper with the full list of names. The names listed in the above caption must be identical to those contained in Part I. Addresses should not be included here.)

**I. Parties in this complaint:**

- A. List your name, address and telephone number. If you are presently in custody, include your identification number and the name and address of your current place of confinement. Do the same for any additional plaintiffs named. Attach additional sheets of paper as necessary.

Plaintiff Name JAMES JIGGETTS  
 Street Address 156 FORSTER AVENUE  
 County, City WESTCHESTER,MOUNT VERNON  
 State & Zip Code NEW YORK,10550  
 Telephone Number 347-858-7833

- B. List all defendants. You should state the full name of the defendant, even if that defendant is a government agency, an organization, a corporation, or an individual. Include the address where each defendant may be served. Make sure that the defendant(s) listed below are identical to those contained in the above caption. Attach additional sheets of paper as necessary.

Defendant No. 1 Name MOHANIE SUKHU-INSTIGATOR  
 Street Address 1048 WARD AVENUE-APT.1A

County, City BRONX COUNTY,BOROUGH OF THE BRONX  
 State & Zip Code NEW YORK,10472  
 Telephone Number 374-458-7328

Defendant No. 2 Name NEW YORK DAILY NEWSPAPER  
 Street Address 4 NEW YORK PLAZA  
 County, City NEW YORK,NEW YORK  
 State & Zip Code NEW YORK,10004  
 Telephone Number \_\_\_\_\_

Defendant No. 3 Name MORTIMER ZUCKERMAN-PUBLISHER  
 Street Address 4 NEW YORK PLAZA  
 County, City NEW YORK,NEW YORK  
 State & Zip Code NEW YORK,10004  
 Telephone Number \_\_\_\_\_

Defendant No. 4 Name COLIN MYLER-EDITOR  
 Street Address 4 NEW YORK PLAZA  
 County, City NEW YORK,NEW YORK  
 State & Zip Code NEW YORK,10004  
 Telephone Number \_\_\_\_\_

## II. Basis for Jurisdiction:

Federal courts are courts of limited jurisdiction. Only two types of cases can be heard in federal court: cases involving a federal question and cases involving diversity of citizenship of the parties. Under 28 U.S.C. § 1331, a case involving the United States Constitution or federal laws or treaties is a federal question case. Under 28 U.S.C. § 1332, a case in which a citizen of one state sues a citizen of another state and the amount in damages is more than \$75,000 is a diversity of citizenship case.

A. What is the basis for federal court jurisdiction? (*check all that apply*)

Federal Questions       Diversity of Citizenship

B. If the basis for jurisdiction is Federal Question, what federal Constitutional, statutory or treaty right is at issue? USCA,18,SECT.1001-1031,1964 CIVIL RIGHTS,USCA,42,SECT,2000(A-E)USCA,42,SECT,1983-1986.8TH AND 14TH AMENDEMENT ISSUES,ADA COMPLIANCE HAS BEEN INFRINGED UPON,ART,I SECT,8 CLAUSE 10,THE CONTRACTS CLAUSE WAS VIOLATED OVER A FALSE STATEMENT THAT MADE ME LOOSE

C. If the basis for jurisdiction is Diversity of Citizenship, what is the state of citizenship of each party?

Plaintiff(s) state(s) of citizenship \_\_\_\_\_

Defendant(s) state(s) of citizenship \_\_\_\_\_

## III. Statement of Claim:

State as briefly as possible the facts of your case. Describe how each of the defendants named in the caption of this complaint is involved in this action, along with the dates and locations of all relevant events.

You may wish to include further details such as the names of other persons involved in the events giving rise to your claims. Do not cite any cases or statutes. If you intend to allege a number of related claims, number and set forth each claim in a separate paragraph. Attach additional sheets of paper as necessary.

A. Where did the events giving rise to your claim(s) occur? AT THE BRONX, NEW YORK CORPORATE WORKPLACE CENTER

B. What date and approximate time did the events giving rise to your claim(s) occur? THESE EVENTS HAD TAKEN PLACE FROM OCTOBER 21-27, 2013 THAT THE FALSE STATEMENTS IN WRITING HAD LED MY NOW

FORMER EMPLOYER(UPS) TO TERMINATE ME, WITH ALREADY PAST ABUSES IN MIND, THEY DID NOT SUPPORT ME.

C. Facts: I STATE TODAY THAT THESE EVENTS ARE AND INDEED HAVE MERIT CONCERNING PROFITING FROM A CLEAR DECEPTION ON THE PART OF THE DEFENDING PARTIES, STATED(SUPRA) THE REPORTING OF A FELONY RAPE IN THE WORKPLACE, THAT IS FALSE AND INDEED DEFAMATORY, AND EXPRESSES AN ECONOMIC CRIME AS EXPLAINED TO ME. MY USCA, 42, SECT, 2000, (A-E), USCA, 42, SECTS. 1983-1986, A DEPRIVATION OF MY CIVIL RIGHTS HAVE BEEN INFRINGED UPON. MY ART. I, SECT. I OF THE NYS CONST, HAS BEEN VIOLATED. MY EIGHTH AS WELL AS MY FOURTEENTH AMENDMENT RIGHTS HAVE BEEN NOW CALLED INTO QUESTION. THE QUESTION OF A FELON RAPE (KNOWN AS A SPECIFIC-INTENT CRIME) ACCORDING TO THE CRIMINAL PROCEDURES LAWS OF THIS JURISDICTION, THIS LAND, AND INDEED THE MODEL PENAL CODE OF 1962 HAS BEEN NOW CALLED INTO QUESTION. IF THERE WAS NO ACT OF FELONY RAPE, WITH THE CONCEPT IN MIND OF (PENETRATION) OF THE (SEXUAL CAVITY) (WHY PRINT IT?) THE LOCAL PRECINCT OF THE NYPD DID NOT HAVE A REPORT OF ANY TERRIBLE ACT DONE BY THIS PLAINTIFF PARTY, NO RAPE KIT PREPARED BY ANY MEDICAL CENTER WITH QUALIFIED PERSONNEL PARTICIPATING IN THE EVALUATION. SO THEREFORE, (SUCH AS IN NEW YORK TIMES VS. SULLIVAN; OF MARCH 29, 1960, (AND THE CURRENT LITIGATION WITH A VIRGINIA FRATERNITY AND THE ROLLING STONE MAGAZINE) WHY ALLOW CITIZENS TO MAKE SUCH STATEMENTS IN WRITING WITH NO SUBSTANTIATED PROOF, FOR WHICH THE BURDEN OF PROOF (1893) IS UPON THE DEFENDING PARTY TO PROVE BEYOND A REASONABLE DOUBT THAT I WOULD PARTICIPATE IN SUCH AN EVENT, THE FIRST DEFENDING PARTY IS CURRENTLY SUING HER FORMER EMPLOYER) AEGIS SECURITY SYSTEMS). ART. 4. SECT. 4-7 OF THE NYS CIVIL RIGHTS LAWS. (VIOLATED).

IV. Injuries:

*Civil Sect. 7A - N.Y.  
Civil Sect. 7B - N.Y.*

If you sustained injuries related to the events alleged above, describe them and state what medical treatment, if any, you required and received.

HERE, IN THIS AREA MY HONESTY MUST INDEED CONTINUE, THAT BECAUSE OF MY NOW FORMER EMPLOYER UNITED PARCEL SERVICE THAT I FIND IT RATHER DIFFICULT TO OBTAIN MY INSULIN MEDICATION WITHOUT SEEKING TEMPORARY ASSISTANCE FOR THE MOMENT. MY PERSONAL ECONOMY HAS COLLAPSED AND MY HOME MAY BE FORECLOSED UPON ME IF FIRM ACTION IS NOT TAKEN BY THE VERY SYSTEM PUT IN PLACE BY THE CITIZENRY TO PREVENT SUCH OUTLANDISH ACTIVITY. PLEASE THIS CASE MUST BE HEARD, IT HAS MERIT.

## V. Relief:

State what you want the Court to do for you and the amount of monetary compensation, if any, you are seeking, and the basis for such compensation. I FIRMLY STATE TODAY THAT BECAUSE OF THESE EVENTS AND THE RATHER OBVIOUS FRAUDULANT STATEMENTS(CRM.PROC.NYC.490) THAT I AM SEEKING DECLARATORY AS WELL AS COMPENSATORY RELIEF IN THE AMOUNT OF 25-(TWENTY-FIVE)MILLION DOLLARS FROM THE PARTIES STATED(SUPRA).

I declare under penalty of perjury that the foregoing is true and correct.

Signed this 27 day of MAY, 2015.

**Signature of Plaintiff**

### Mailing Address

156 FORSTER AVENUE

## WESTCHESTER, MOUNT VERNON

NEW YORK, 10550

**Telephone Number**

347-858-7833

**Fax Number (if you have one)**

**Note:** All plaintiffs named in the caption of the complaint must date and sign the complaint. Prisoners must also provide their inmate numbers, present place of confinement, and address.

### **For Prisoners:**

I declare under penalty of perjury that on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_, I am delivering this complaint to prison authorities to be mailed to the *Pro Se* Office of the United States District Court for the Southern District of New York.

**Signature of Plaintiff:** \_\_\_\_\_

Inmate Number

UNITED STATES DISTRICT COURT  
SOUTHERN DISTRICT OF NEW YORK

JAMES JIGGETTS

(In the space above enter the full name(s) of the plaintiff(s).)

-against-

NEW YORK DAILY NEWSPAPER

JOHN MARZULLO-AUTHOR

MORTIMER ZUCKERMAN-PUBLISHER

COLIN MYLER-EDITOR

MOHANIE SUKHU-INSTIGATOR

**COMPLAINT**

Jury Trial:  Yes  No  
(check one)

(In the space above enter the full name(s) of the defendant(s). If you cannot fit the names of all of the defendants in the space provided, please write "see attached" in the space above and attach an additional sheet of paper with the full list of names. The names listed in the above caption must be identical to those contained in Part I. Addresses should not be included here.)

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Street Address 156 FOSTER AVENUE  
County, City WESCHETER,MOUNT VERNON  
State & Zip Code NEW YOIRK,10550  
Telephone Number 347-858-7833

- B. List all defendants. You should state the full name of the defendant, even if that defendant is a government agency, an organization, a corporation, or an individual. Include the address where each defendant may be served. Make sure that the defendant(s) listed below are identical to those contained in the above caption. Attach additional sheets of paper as necessary.

Defendant No. 1 Name JOHN MARZULLO-AUTHOR  
Street Address 4 NEW YORK PLAZA

County, City NEW YORK, NEW YORK  
State & Zip Code NEW YORK, 10004  
Telephone Number \_\_\_\_\_

Defendant No. 2 Name \_\_\_\_\_  
Street Address \_\_\_\_\_  
County, City \_\_\_\_\_  
State & Zip Code \_\_\_\_\_  
Telephone Number \_\_\_\_\_

Defendant No. 3 Name \_\_\_\_\_  
Street Address \_\_\_\_\_  
County, City \_\_\_\_\_  
State & Zip Code \_\_\_\_\_  
Telephone Number \_\_\_\_\_

Defendant No. 4 Name \_\_\_\_\_  
Street Address \_\_\_\_\_  
County, City \_\_\_\_\_  
State & Zip Code \_\_\_\_\_  
Telephone Number \_\_\_\_\_

**II. Basis for Jurisdiction:**

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Federal Questions                    Diversity of Citizenship

B. If the basis for jurisdiction is Federal Question, what federal Constitutional, statutory or treaty right is at issue? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

C. If the basis for jurisdiction is Diversity of Citizenship, what is the state of citizenship of each party?

Plaintiff(s) state(s) of citizenship \_\_\_\_\_

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